

| CLAIMS ONLY       |          |        |                       |        |                        | Application Number<br>10/070,540                  | Filing Date |        |       |
|-------------------|----------|--------|-----------------------|--------|------------------------|---|-------------|--------|-------|
|                   |          |        |                       |        |                        | Applicant(s)                                      |             |        |       |
| <i>10 - 12-04</i> |          |        |                       |        |                        | * May be used for additional claims or amendments |             |        |       |
| CLAIMS            | AS FILED |        | AFTER FIRST AMENDMENT |        | AFTER SECOND AMENDMENT |   | *           | *      | *     |
|                   | Indep    | Depend | Indep                 | Depend | Indep                  | Depend  | Indep       | Depend | Indep |
| 1                 |          | /      |                       |        |                        |   |             |        |       |
| 2                 |          | /      |                       | /      |                        |   |             |        |       |
| 3                 |          | /      |                       | /      |                        |   |             |        |       |
| 4                 |          | /      |                       | /      |                        |   |             |        |       |
| 5                 |          | /      |                       | /      |                        |   |             |        |       |
| 6                 |          | /      |                       | /      |                        |   |             |        |       |
| 7                 |          |        |                       | /      |                        |   |             |        |       |
| 8                 |          |        |                       | /      |                        |   |             |        |       |
| 9                 |          |        |                       | /      |                        |   |             |        |       |
| 10                |          |        |                       | /      |                        |   |             |        |       |
| 11                |          |        |                       | /      |                        |   |             |        |       |
| 12                |          |        |                       | /      |                        |   |             |        |       |
| 13                |          |        |                       | /      |                        |   |             |        |       |
| 14                |          |        |                       | /      |                        |   |             |        |       |
| 15                |          |        |                       | /      |                        |   |             |        |       |
| 16                |          |        |                       |        |                        |   |             |        |       |
| 17                |          |        |                       |        | X                      |   |             |        |       |
| 18                |          |        |                       |        |                        |   |             |        |       |
| 19                |          |        |                       |        |                        |   |             |        |       |
| 20                |          |        |                       |        |                        |   |             |        |       |
| 21                |          |        |                       |        |                        |   |             |        |       |
| 22                |          |        |                       |        |                        |   |             |        |       |
| 23                |          |        |                       |        |                        |   |             |        |       |
| 24                |          |        |                       |        |                        |   |             |        |       |
| 25                |          |        |                       |        |                        |   |             |        |       |
| 26                |          |        |                       |        |                        |   |             |        |       |
| 27                |          |        |                       |        |                        |   |             |        |       |
| 28                |          |        |                       |        |                        |   |             |        |       |
| 29                |          |        |                       |        |                        |   |             |        |       |
| 30                |          |        |                       |        |                        |   |             |        |       |
| 31                |          |        |                       |        |                        |   |             |        |       |
| 32                |          |        |                       |        |                        |   |             |        |       |
| 33                |          |        |                       |        |                        |   |             |        |       |
| 34                |          |        |                       |        |                        |   |             |        |       |
| 35                |          |        |                       |        |                        |   |             |        |       |
| 36                |          |        |                       |        |                        |   |             |        |       |
| 37                |          |        |                       |        |                        |   |             |        |       |
| 38                |          |        |                       |        |                        |   |             |        |       |
| 39                |          |        |                       |        |                        |   |             |        |       |
| 40                |          |        |                       |        |                        |   |             |        |       |
| 41                |          |        |                       |        |                        |   |             |        |       |
| 42                |          |        |                       |        |                        |   |             |        |       |
| 43                |          |        |                       |        |                        |   |             |        |       |
| 44                |          |        |                       |        |                        |   |             |        |       |
| 45                |          |        |                       |        |                        |   |             |        |       |
| 46                |          |        |                       |        |                        |   |             |        |       |
| 47                |          |        |                       |        |                        |   |             |        |       |
| 48                |          |        |                       |        |                        |   |             |        |       |
| 49                |          |        |                       |        |                        |   |             |        |       |
| 50                |          |        |                       |        |                        |   |             |        |       |
| Total Indep       |          | /      |                       | /      |                        |   |             |        |       |
| Total Depend      | 18       |        |                       | 15     |                        |   |             |        |       |
| Total Claims      | 17       |        | 16                    |        |                        |   |             |        |       |